		Legislative Session	CALIFORNIA 603
Check the applicable box:			FORM FAIR POLITICAL PRACTICES COMM.
□ Lobbyist Employer Registration	n Statement		For Official Use Only
☐ Lobbying Coalition Registration (Government Code Section 86105)	on Statement	2017 2018 (Insert Years)	-
Type or Print in ink		1/4	
NAME OF LOBBYIST EMPLOYER OR LOBBYING O	COALITION:		If this is an initial registration, enter the DATE QUALIFIED:
EMSO ASSET MANAGEMENT US LLC			01/01/2017
BUSINESS ADDRESS: (Number and Street)	(City)	(State) (Zip Code)	TELEPHONE NUMBER:
	NEW YORK	NY 10019	FAX NUMBER: (Optional)
MAILING ADDRESS: (If different than above)			E-MAIL: (Optional)
			 IHOR.RAKOWSKY@EMSO.COM
I Lobbyists and Lobbying Firms Empl	oyed		<u> </u>
* List the full name of each in-house lobbyist er	nployed and each lobbying firm	with which you contract.	
Please see attached pages			
II List Below the State Agencies Whos * Will you attempt to influence the State Legisla Please see attached pages III Description of Lobbying Interests * For assistance, see the instructions on the ba	ature?	□ No	ure Provisions
of the Political Reform Act." Investment Ad		Ti Mandai on Eobbying Discios	ure i revisions
	VERIFICATION		
I have used all reasonable diligence in pedge the information contained herein is true I certify under penalty of perjury under the	e and complete.		
Executed On	<u>6</u> ву <u>Г</u>	HOR RAKOWSKY SIGNATURE OF RESPO	NSIBLE OFFICER
Name of Responsible Officer IHOR RAKOWSKY		Title GENERAL COUNS	EL
	TYPE OR PRINT		EDDC Farms (02 /7/00)

FPPC Form 603 (7/98) For Technical Assistance: 916/322-5660

CALIFORNIA Coalition Registration Statement FORM FAIR POLITICAL PRACTICES COM SEE INSTRUCTIONS ON REVERSE Type or Print in ink NAME OF LOBBYIST EMPLOYER OR LOBBYING COALITION: 2/4 EMSO ASSET MANAGEMENT US LLC **Nature and Interests of Filer** Check one box only: **BUSINESS ENTITY** INDIVIDUAL (Complete INDUSTRY, TRADE OR OTHER (e.g., lobbying only Parts A and E) (Complete only Parts B PROFESSIONAL ASSN. coalition) (Complete only and E) (Complete only Parts C and E) Parts D and E) A. Individual 2. Description of business activity in which you or your employer are 1. Name and address of employer (or principal place of business if engaged: self-employed): **B. Business Entity** Description of business activity in which engaged: C. Industry, Trade or Professional Association 2. Specific description of any portion or faction of the industry, trade or 1. Description of industry, trade or profession represented: profession which the association exclusively or primarily represents: **Financial Services** 3. Number of members in association (check appropriate box) 50 OR LESS (provide names of all members on an attachment.) MORE THAN 50 D. Other 2. Description of any trade, profession, or other group with a common 1. Statement of nature and purposes: economic interest which is principally represented or from which membership or financial support is principally derived: E. Industry Group Classification Check one box which most accurately describes the industry group which you represent. See instructions on reverse. **AGRICULTURE LEGAL** BUSINESS (Check one of the following sub-categories.) **ENTERTAINMENT/RECREATION** OIL AND GAS **EDUCATION PUBLIC EMPLOYEES** FINANCE/INSURANCE PROFESSIONAL/TRADE GOVERNMENT POLITICAL ORGANIZATIONS LODGING/RESTAURANTS **REAL ESTATE** MANUFACTURING/INDUSTRIAL **TRANSPORTATION HEALTH** UTILITIES MERCHANDISE/RETAIL OTHER (Describe)

Lobbyist Employer/Lobbying

LABOR UNIONS

OTHER:

(Describe)

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Lobbyist Employer/Lobbying Coalition Registration Statement

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II List Below the State Agencies Whose Actions you Will Attempt to Influence	
CalPERS	
CalSTRS	
UC Regents	

Lobbyist Employer/Lobbying Coalition Registration Statement

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FAIR POLITICAL PRACT	TICES COMM.
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I Lobbyists and Lobbying Firms Employed

List the full name of	each in-house lobl	ovist employ	ved and each	lobbying firm	with which	vou contract
LIST THE TAIL HATTIC OF		Jyiot Cilipio	you and caon		A AAICH AAIHOH A	you continue.

Employee Lobbyist

Donald Lucardi